

| No. <b>C 19960</b>   | <b>Due no later than Mar 31, 2014<br/>Annual Report Form</b>  |                      | 2. Registered Agent and Office<br><b>(NOT A P.O. BOX)</b><br>KAREN A MOIR<br>1193 E 1500 N<br>IDAHO FALLS ID 83402 |                              |                       |   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
|--|---|----------------------|--|------------------------------|-----------------------|---|-------------------------|-------|---------|-------------|-----------|------------|------------------|-------------|----|-----|-------|-----------|-------------|----------------|-------------|----|-----|-------|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>         RECEIVED BY DUE<br/>         DATE</b>   | 1. <b>Mailing Address: Correct in this box if needed.</b><br>YORK GRANGE NO. 253, INCORPORATED<br>KAREN MOIR<br>1193 E 1500 N<br>IDAHO FALLS ID 83402   |                      | 3. <u>New</u> Registered Agent Signature.  |                              |                       |   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.<br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Nita Rowe,</td> <td>474 Whittier #20</td> <td>Idaho Falls</td> <td>ID</td> <td>USA</td> <td>83401</td> </tr> <tr> <td>Secretary</td> <td>Karen Moir,</td> <td>1193 E 1500 N,</td> <td>IDAHO FALLS</td> <td>ID</td> <td>USA</td> <td>83402</td> </tr> </tbody> </table> |   |                      |  | Office Held                  | Name                  | Street or PO Address                    | City                    | State | Country | Postal Code | President | Nita Rowe, | 474 Whittier #20 | Idaho Falls | ID | USA | 83401 | Secretary | Karen Moir, | 1193 E 1500 N, | IDAHO FALLS | ID | USA | 83402 |
| Office Held  | Name  | Street or PO Address | City   | State                        | Country               | Postal Code                             |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| President  | Nita Rowe,  | 474 Whittier #20     | Idaho Falls  | ID                           | USA                   | 83401                                   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| Secretary  | Karen Moir,   | 1193 E 1500 N,       | IDAHO FALLS  | ID                           | USA                   | 83402                                   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| 5. Organized Under the Laws of:<br><br><div style="text-align: center;"> <b>IDAHO</b><br/> <b>C 19960</b> </div>   | 6. <table style="width: 100%;"> <tr> <td style="width: 70%;">Signature: <u>Karen Moir</u></td> <td style="width: 30%;">Date: <u>12/12/14</u></td> </tr> <tr> <td>Name (type or print): <u>Karen Moir</u></td> <td>Title: <u>Secretary</u></td> </tr> </table> |                      |  | Signature: <u>Karen Moir</u> | Date: <u>12/12/14</u> | Name (type or print): <u>Karen Moir</u> | Title: <u>Secretary</u> |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| Signature: <u>Karen Moir</u>   | Date: <u>12/12/14</u>   |                      |  |                              |                       |   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |
| Name (type or print): <u>Karen Moir</u>  | Title: <u>Secretary</u>   |                      |  |                              |                       |   |                         |       |         |             |           |            |                  |             |    |     |       |           |             |                |             |    |     |       |

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM